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| Fill in this information to identify your case: |                                 |                                   |
|---|---------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                   |
| Case number (if known)                          | _ Chapter you are filing under: |                                   |
|   | Chapter 7                       |                                   |
|   | ☐ Chapter 11                    |                                   |
|   | ☐ Chapter 12                    |                                   |
|   | ☐ Chapter 13                    | ☐ Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1:   | Identify Yourself  |  |   |
|-----|---|--|--|---|
|     |   |  | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | You   | r full name  |  |   |
|     | Write   | e the name that is on  | Victor                                   |   |
|     | your government-issued picture identification (for example, your driver's |  | First name                               | First name                                    |
|     |   | se or passport).   | Middle name                              | Middle name                                   |
|     | Bring   | g your picture   | Villalobos                               |   |
|     |   | tification to your ting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | used<br>Inclu   | other names you have<br>d in the last 8 years<br>ade your married or<br>den names.                     | Victor M. Villalobos                     |   |
| 3.  | you<br>num<br>Indi  | y the last 4 digits of<br>r Social Security<br>aber or federal<br>vidual Taxpayer<br>tification number | xxx-xx-0078                              |   |

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Debtor 1 Victor Villalobos

Case number (if known)

|   |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |  |
|---|---|---|--|--|--|--|--|
| Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years  Include trade names and<br>doing business as names |   | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |  |  |  |  |
| 5.  | Where you live  | 2107 W. Glen Flora Avenue   | If Debtor 2 lives at a different address:  |  |  |  |  |
|   |   | Waukegan, IL 60085  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |  |  |  |  |
|   |   | Lake<br>County  | County   |  |  |  |  |
|   |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |  |
|   |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |  |
| 6.  | Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                    | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.           |  |  |  |  |
|   |   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |  |  |

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Case number (if known) Debtor 1 Victor Villalobos

| ar  | t 2: Tell the Court About  | Your E                   | 3ankruptcy Ca                  | ise                                 |   |  |         |  |
|-----|--|--------------------------|--------------------------------|-------------------------------------|---|--|---------|--|
| 7.  | The chapter of the Bankruptcy Code you are                                   |                          |                                |                                     | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankr<br>box.  | uptcy   |  |
|     | choosing to file under   | ■ Chapter 7 □ Chapter 11 |                                |                                     |   |  |         |  |
|     |  |                          |                                |                                     |   |  |         |  |
|     |  |                          | Chapter 12                     |                                     |   |  |         |  |
|     |  |                          | Chapter 13                     |                                     |   |  |         |  |
|     |  |                          |                                |                                     |   |  |         |  |
| 3.  | How you will pay the fee   |                          | about how yo                   | ou may pay. Typ<br>attorney is subi | oically, if you are paying the fee you                                    | with the clerk's office in your local court for morurself, you may pay with cash, cashier's check, o lf, your attorney may pay with a credit card or ch            | r money |  |
|     |  |                          | I need to pay<br>The Filing Fe | y the fee in instee in Inste        | tallments. If you choose this options (Official Form 103A).               | n, sign and attach the Application for Individuals   | to Pay  |  |
|     |  |                          | but is not req                 | uired to, waive                     | your fee, and may do so only if you                                       | only if you are filing for Chapter 7. By law, a judg<br>ar income is less than 150% of the official poverty<br>se in installments). If you choose this option, you | / line  |  |
|     |  |                          |                                |                                     |   | Official Form 103B) and file it with your petition.  |         |  |
| ).  | Have you filed for bankruptcy within the last 8 years?                       | ■ N                      | 0.                             |                                     |   |  |         |  |
|     |  | □ Y                      | es.                            |                                     |   |  |         |  |
|     |  |                          | District                       |                                     | When  | Case number  |         |  |
|     |  |                          | District                       |                                     | When  | Case number  |         |  |
|     |  |                          | District                       |                                     | When  | Case number  |         |  |
| 10. | Are any bankruptcy   | ■ N                      |                                |                                     |   |  |         |  |
|     | cases pending or being filed by a spouse who is                              |                          |                                |                                     |   |  |         |  |
|     | not filing this case with you, or by a business partner, or by an affiliate? | ПΥ                       | es.                            |                                     |   |  |         |  |
|     |  |                          | Debtor                         |                                     |   | Relationship to you  |         |  |
|     |  |                          | District                       |                                     | When  | Case number, if known  |         |  |
|     |  |                          | Debtor                         |                                     |   | Relationship to you  |         |  |
|     |  |                          | District                       |                                     | When  | Case number, if known  |         |  |
| 11. | Do you rent your   | ■ N                      | Go to I                        | ine 12.                             |   |  |         |  |
|     | residence?   |                          |                                | our landlord obta                   | ained an eviction judgment against  | you and do you want to stay in your residence?   |         |  |
|     |  |                          | es. Has ye                     | No. Go to line                      |   | , ac year man to day in year residence.  |         |  |
|     |  |                          |                                |                                     | itial Statement About an Eviction J                                       | ludgment Against You (Form 101A) and file it witl  | n this  |  |
|     |  |                          |                                | bankruptcy per                      | iitiOii.  |  |         |  |

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Desc Main Document Page 4 of 58 Case number (if known) Debtor 1 Victor Villalobos Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a Name of business, if any business you operate as an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

I am not filing under Chapter 11. No.

None of the above

☐ No.

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

#### Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 **Victor Villalobos** 

Part 5:

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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**Victor Villalobos** Case number (if known) Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion □ \$0 - \$50,000 estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Victor Villalobos Signature of Debtor 2 Victor Villalobos Signature of Debtor 1 Executed on October 19, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Marceli     |                        | Date          | October 19, 2017      |
|-----------------|------------------------|---------------|-----------------------|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY        |
| Marcelino       | Diaz                   |               |                       |
| Printed name    |                        |               |                       |
| Law Office      | es of Marcelino Diaz   |               |                       |
| Firm name       |                        |               |                       |
| 5 S. Coun       | ty Street              |               |                       |
| Waukegar        | n, IL 60085            |               |                       |
| Number, Street, | City, State & ZIP Code |               |                       |
| Contact phone   | (847) 244-7288         | Email address | lawyermdiaz@yahoo.com |
| 6271542         |                        |               |                       |
| Bar number & S  | tate                   |               |                       |

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|                        |                          | Docum             |             |                       |
|------------------------|--------------------------|-------------------|-------------|-----------------------|
| Fill in this infor     | mation to identify your  | case:             |             |                       |
| Debtor 1               | Victor Villalobos        |                   |             |                       |
|                        | First Name               | Middle Name       | Last Name   |                       |
| Debtor 2               |                          |                   |             |                       |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name   |                       |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number (if known) |                          |                   |             | ☐ Check if this is an |
|                        |                          |                   |             | amended filing        |

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|    |  | Your a     | assets<br>of what you own |
|----|--|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$         | 0.00                      |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$         | 4,250.00                  |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$         | 4,250.00                  |
| Pa | rt 2: Summarize Your Liabilities   |            |                           |
|    |  |            | iabilities<br>nt you owe  |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$         | 0.00                      |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$         | 0.00                      |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$         | 181,220.36                |
|    | Your total liabilities   | \$         | 181,220.36                |
| Pa | rt 3: Summarize Your Income and Expenses   |            |                           |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$         | 2,296.00                  |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$         | 2,290.00                  |
| Pa | rt 4: Answer These Questions for Administrative and Statistical Records  |            |                           |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo                      | ur other s | chedules.                 |
| 7. | ■ Yes What kind of debt do you have?   |            |                           |

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$<br>2,285.00 |
|----|--|----------------|
|    |  |                |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total clair | n    |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

Case 17-31375 Doc 1 Filed 10/19/17 Entered 10/19/17 16:31:32 Desc Main Document Page 10 of 58 Fill in this information to identify your case and this filing: Debtor 1 **Victor Villalobos** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Hyundai Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Sonata Creditors Who Have Claims Secured by Property. Debtor 1 only 2002 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 155,000 ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$500.00 \$500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Buick** Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Rainier Creditors Who Have Claims Secured by Property. Model Debtor 1 only 2004 Year: Debtor 2 only Current value of the Current value of the 110,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$2,000.00 \$2,000.00 ☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

Case 17-31375 Doc 1 Filed 10/19/17 Entered 10/19/17 16:31:32 Desc Main Document Page 11 of 58 Case number (if known) Debtor 1 **Victor Villalobos** 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,500.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Furniture and household goods \$450.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... T.V., radio, computer \$250.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$350.00 Clothing and accessories 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

☐ Yes. Describe.....

## 13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

## 14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

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Case number (if known) Debtor 1 **Victor Villalobos** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,050.00 for Part 3. Write that number here ...... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$700.00 Consumer's Co-Op Credit Union 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

|    |  | Case 17-313   | 75 Doc 1             | Filed 10/19/17<br>Document                                  | Entered 10/19/17 16:31:32<br>Page 13 of 58             | Desc Main   |  |  |
|----|--|---|----------------------|---|--|---|--|--|
| D  | ebtor 1  | Victor Villalobos                                       | i                    | Document  | Case number (if known)                                 |   |  |  |
| 25 | 5. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit  No |   |                      |   |  |   |  |  |
|    | ☐ Yes.   | Give specific informa                                   | tion about them      |   |  |   |  |  |
| 26 | Examp<br>■ No  |   | names, websites,     | ,   | al property<br>and licensing agreements                |   |  |  |
|    |  | ·   |                      |   |  |   |  |  |
| 27 | Examp ■ No   |   | exclusive licenses   | s, cooperative association                                  | n holdings, liquor licenses, professional licens       | es  |  |  |
|    | ☐ Yes.   | Give specific informa                                   | tion about them      |   |  |   |  |  |
| M  | oney or  | property owed to you                                    | u?                   |   |  | Current value of the portion you own? Do not deduct secured claims or exemptions. |  |  |
| 28 |  | unds owed to you  |                      |   |  |   |  |  |
|    | ■ No<br>□ Yes  | Give specific informat                                  | ion about them in    | ocluding whether you alre                                   | ady filed the returns and the tax years                |   |  |  |
|    | □ 1es.   | Give specific informati                                 | ion about them, ii   | icidaling whether you alle                                  | ady filed the returns and the tax years                |   |  |  |
| 29 | Examp<br>■ No  | support  bles: Past due or lump  Give specific informat |                      | ousal support, child supp                                   | ort, maintenance, divorce settlement, property         | settlement  |  |  |
| 30 |  |   |                      |   | efits, sick pay, vacation pay, workers' compe          | nsation, Social Security  |  |  |
|    |  | Give specific informa                                   | tion                 |   |  |   |  |  |
| 31 | Examp  | ets in insurance polic<br>bles: Health, disability,     |                      | health savings account (                                    | HSA); credit, homeowner's, or renter's insura          | nce   |  |  |
|    | ■ No<br>□ Yes  | Name the insurance of                                   | company of each r    | policy and list its value.                                  |  |   |  |  |
|    | <b>—</b> 100.  | rame the modification of                                | Company name:        | only and not no value.                                      | Beneficiary:   | Surrender or refund value:  |  |  |
| 32 | If you a someo   | are the beneficiary of a                                | a living trust, expe | n someone who has die<br>ect proceeds from a life in        | ed<br>surance policy, or are currently entitled to rec | eive property because   |  |  |
|    | ⊔ Yes.   | Give specific informa                                   | ition                |   |  |   |  |  |
| 33 |  |   |                      | t <b>you have filed a lawsu</b> insurance claims, or rights | it or made a demand for payment<br>s to sue            |   |  |  |
|    | ☐ Yes.   | Describe each claim.                                    |                      |   |  |   |  |  |
| 34 | ■ No   | contingent and unliq                                    |                      | f every nature, includin                                    | g counterclaims of the debtor and rights to            | set off claims  |  |  |
| ٥. |  |   |                      |   |  |   |  |  |
| 35 | ■ No   | ancial assets you di Give specific informa              | -                    | i.  |  |   |  |  |

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| Deb   | tor 1 Victor Villalobos   |                            | Case number (if known)       |            |
|-------|---|----------------------------|------------------------------|------------|
| 36.   | Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here                              |                            |                              | \$700.00   |
| Part  | 5: Describe Any Business-Related Property You Own or Have an Interes  | st In. List any real estat | e in Part 1.                 |            |
|       | o you own or have any legal or equitable interest in any business-related   | property?                  |                              |            |
|       | No. Go to Part 6.   |                            |                              |            |
|       | Yes. Go to line 38.   |                            |                              |            |
| Part  | 6: Describe Any Farm- and Commercial Fishing-Related Property You Olf you own or have an interest in farmland, list it in Part 1. | Own or Have an Interest    | ln.                          |            |
| 46. l | Do you own or have any legal or equitable interest in any farm-   | or commercial fishi        | ng-related property?         |            |
|       | No. Go to Part 7.   |                            |                              |            |
|       | Yes. Go to line 47.   |                            |                              |            |
| Part  | 7: Describe All Property You Own or Have an Interest in That You  | Did Not List Above         |                              |            |
|       | Do you have other property of any kind you did not already list?<br>Examples: Season tickets, country club membership             | ?                          |                              |            |
|       | No  |                            |                              |            |
|       | Yes. Give specific information  |                            |                              |            |
| 54.   | Add the dollar value of all of your entries from Part 7. Write the  | at number here             |                              | \$0.00     |
| Part  | 8: List the Totals of Each Part of this Form  |                            |                              |            |
| 55.   | Part 1: Total real estate, line 2   |                            |                              | \$0.00     |
| 56.   | Part 2: Total vehicles, line 5  | \$2,500.00                 |                              |            |
| 57.   | Part 3: Total personal and household items, line 15   | \$1,050.00                 |                              |            |
| 58.   | Part 4: Total financial assets, line 36   | \$700.00                   |                              |            |
| 59.   | Part 5: Total business-related property, line 45  | \$0.00                     |                              |            |
| 60.   | Part 6: Total farm- and fishing-related property, line 52   | \$0.00                     |                              |            |
| 61.   | Part 7: Total other property not listed, line 54 +  | \$0.00                     |                              |            |
| 62.   | Total personal property. Add lines 56 through 61  | \$4,250.00                 | Copy personal property total | \$4,250.00 |
| 63.   | Total of all property on Schedule A/B. Add line 55 + line 62  |                            |                              | \$4,250.00 |

Official Form 106A/B Schedule A/B: Property page 5

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|   |                         | Doddine           | T GGC TO CI CO |                       |
|---|-------------------------|-------------------|----------------|-----------------------|
| Fill in this infor                      | mation to identify your | case:             |                |                       |
| Debtor 1                                | Victor Villalobos       |                   |                |                       |
|   | First Name              | Middle Name       | Last Name      |                       |
| Debtor 2                                |                         |                   |                |                       |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name      |                       |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS    |                       |
| Case number                             |                         |                   |                |                       |
| (if known)                              |                         |                   |                | ☐ Check if this is an |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|  | Part 1: | Identify the Property You Claim as | Exemp |
|--|---------|------------------------------------|-------|
|--|---------|------------------------------------|-------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property                     | Current value of the<br>portion you own | Amo             | ount of the exemption you claim                                 | Specific laws that allow exemption |
|---|---|-----------------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B     | Che             | ck only one box for each exemption.                             |                                    |
| 2002 Hyundai Sonata 155,000 miles                         | \$500.00                                | <b>\$500.00</b> |   | 735 ILCS 5/12-1001(b)              |
| Life from Schedule Adb. 3.1                               |   |                 | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2004 Buick Rainier 110,000 miles                          | \$2,000.00                              |                 | \$2,000.00  | 735 ILCS 5/12-1001(c)              |
| Line nom Scredule AVB. 3.2                                |   |                 | 100% of fair market value, up to any applicable statutory limit |                                    |
| Furniture and household goods Line from Schedule A/B: 6.1 | \$450.00                                |                 | \$450.00  | 735 ILCS 5/12-1001(b)              |
| Line nom <i>Schedule Avb.</i> <b>4.1</b>                  |   |                 | 100% of fair market value, up to any applicable statutory limit |                                    |
| T.V., radio, computer                                     | \$250.00                                |                 | \$250.00  | 735 ILCS 5/12-1001(b)              |
| Line Hori Schedule AVB. 1.1                               |   |                 | 100% of fair market value, up to any applicable statutory limit |                                    |
| Clothing and accessories Line from Schedule A/B: 11.1     | \$350.00                                |                 | \$350.00  | 735 ILCS 5/12-1001(a)              |
| LINE HOIN Scriedule A/B: 11.1                             |   |                 | 100% of fair market value, up to any applicable statutory limit |                                    |

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Case number (if known)

Print description of the property and line and Current value of the Amount of the compiling requirements and line and Current value of the Amount of the compiling requirements. Specific laws that allows a compiling requirements and line and compiling requirements.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |  |
|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|
|  | Copy the value from<br>Schedule A/B  | Che                               | eck only one box for each exemption.                            |                                    |  |
| Checking: Consumer's Co-Op Credit Union  | \$700.00                             |                                   | \$700.00  | 735 ILCS 5/12-1001(b)              |  |
| Line from Schedule A/B: 17.1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit | )                                  |  |
| Line from Schedule A/B: 17.1  Are you claiming a homestead exemption o                 | of more than \$160.37                |                                   | · •   |                                    |  |
| (Subject to adjustment on 4/01/19 and every 3  |                                      |                                   | iled on or after the date of adjustme                           | ent.)                              |  |
| ■ No   |                                      |                                   |   |                                    |  |
| ☐ Yes. Did you acquire the property covered  | d by the exemption w                 | ithin 1                           | ,215 days before you filed this case                            | e?                                 |  |

No

Yes

| Fill in this infor     |                          |                   |             |                      |
|------------------------|--------------------------|-------------------|-------------|----------------------|
| Debtor 1               | Victor Villalobos        |                   |             |                      |
|                        | First Name               | Middle Name       | Last Name   |                      |
| Debtor 2               |                          |                   |             |                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name   |                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                      |
| Case number (if known) |                          |                   |             | ☐ Check if this is a |

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|                                     | Case 17-31375 Duc  | _  |                               | tu 10/19/1/ 10.3  | 1.32 Des                                  | SC Main   |
|-------------------------------------|--|--|-------------------------------|---|---|---|
| Fill in th                          | nis information to identify your case  | Document   | Page 1                        | 8 01 58   |   |   |
|                                     |  | •  |                               |   |   |   |
| Debtor 1                            | Victor Villalobos First Name   | Middle Name  | Last Name                     |   |   |   |
| Debtor 2                            |  | Wilder Name  | Lastivanie                    |   |   |   |
| (Spouse if,                         |  | Middle Name  | Last Name                     |   |   |   |
| United S                            | States Bankruptcy Court for the: NO  | RTHERN DISTRICT OF ILLI  | NOIS                          |   |   |   |
| Case nu                             | ımbor  |  |                               |   |   |   |
| (if known)                          |  |  |                               |   |   | Check if this is an                                     |
|                                     |  |  |                               |   |   | amended filing  |
| Officia                             | al Form 106E/F   |  |                               |   |   |   |
|                                     | dule E/F: Creditors Who  | Have Uncoured (  | Claime                        |   |   | 12/15   |
|                                     | nplete and accurate as possible. Use Part  |  |                               | out 2 for anoditors with NO                                     | UDDIODITY eleim                           |   |
| Schedule<br>D: Credito<br>he Contir | Intory contracts or unexpired leases that conditions of the Contracts and Unexpired Leads Who Have Claims Secured by Property unation Page to this page. If you have no if known).   | eases (Official Form 106G). Do r<br>r. If more space is needed, copy | not include a<br>the Part you | ny creditors with partially s<br>I need, fill it out, number th | secured claims the<br>ne entries in the b | hat are listed in Schedule<br>boxes on the left. Attach |
| Part 1:                             | List All of Your PRIORITY Unsecu   | red Claims   |                               |   |   |   |
| 1. Do a                             | ny creditors have priority unsecured clain   | ns against you?  |                               |   |   |   |
|                                     | lo. Go to Part 2.  |  |                               |   |   |   |
| ΠY                                  | es.  |  |                               |   |   |   |
| Part 2:                             | List All of Your NONPRIORITY Un  | secured Claims   |                               |   |   | <del></del>   |
| 3. Do a                             | ny creditors have nonpriority unsecured o  | laims against you?   |                               |   |   |   |
| □N                                  | o. You have nothing to report in this part. Su   | bmit this form to the court with you                                 | ur other sche                 | dules.  |   |   |
| <b>■</b> Y                          | es.  |  |                               |   |   |   |
| claim                               | all of your nonpriority unsecured claims in all ist the creditor separately for each claim. For holds a particular claim, list the other credits and the control of the con | or each claim listed, identify what                                  | type of claim                 | it is. Do not list claims alrea                                 | dy included in Par                        | t 1. If more than one                                   |
| 4.1                                 | 888rentme2, LLC  | Last 4 digits of accou   | ınt number                    | 4494  |   | \$180.00  |
|                                     | Nonpriority Creditor's Name  | When we the debt in  |                               | 00/22/2046  |   |   |
|                                     | 1954 First Street<br>Highland Park, IL 60035   | When was the debt in   | icurrea?                      | 09/22/2016  |   | _   |
|                                     | Number Street City State Zlp Code  | As of the date you file  | e, the claim i                | s: Check all that apply   |   |   |
| ,                                   | Who incurred the debt? Check one.  | ☐ Contingent   |                               |   |   |   |
|                                     | Debtor 1 only  | ☐ Unliquidated   |                               |   |   |   |
|                                     | Debtor 2 only  | ☐ Disputed   |                               |   |   |   |
|                                     | Debtor 1 and Debtor 2 only   | Type of NONPRIORIT   | Y unsecured                   | claim:  |   |   |
|                                     | ☐ At least one of the debtors and another  | ☐ Student loans  |                               |   |   |   |
|                                     | ☐ Check if this claim is for a community Is the claim subject to offset?   | <b>debt</b> Obligations arising report as priority claims            |                               | ration agreement or divorce                                     | that you did not                          |   |
|                                     | ■ No   | Debts to pension o   | r profit-sharin               | g plans, and other similar de                                   | bts                                       |   |
|                                     | ☐ Yes  | Other, Specify S   | ervices                       |   |   |   |

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Debtor 1 Victor Villalobos Case number (if know) 4.2 account resolution corporation Last 4 digits of account number 5786 \$700.00 Nonpriority Creditor's Name **PO BOX 3860** When was the debt incurred? 4/2014 Chesterfield, MO 63006 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit 4.3 **AR Resources** 6031 \$268.00 Last 4 digits of account number Nonpriority Creditor's Name 3107 Spring Glen Road When was the debt incurred? Suite 21 Jacksonville, FL 32207-5916 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections account 4.4 ARS National Services, Inc. Last 4 digits of account number 4392 \$2,633.00 Nonpriority Creditor's Name PO Box 463023 When was the debt incurred? Escondido, CA 92046-3023 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collections account

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Debtor 1 Victor Villalobos Case number (if know) 4.5 ARS National Services, Inc. Last 4 digits of account number 1834 \$2,633.15 Nonpriority Creditor's Name PO Box 463023 When was the debt incurred? 9/2013 Escondido, CA 92046-3023 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify fia card 4.6 ARS National Services, Inc. 1834 \$2,633.15 Last 4 digits of account number Nonpriority Creditor's Name PO Box 463023 When was the debt incurred? 10/2013 Escondido, CA 92046-3023 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit collection FIA card ☐ Yes 4.7 AT&T U-verse (SM) Last 4 digits of account number 8477 \$151.00 Nonpriority Creditor's Name P.O. Box 1857 When was the debt incurred? 2013 Alpharetta, GA 30023 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utiltiy bill ☐ Yes

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| Victor Villalobos  | Case number (if know)   |            |
|--|---|------------|
| Bank of America  | Last 4 digits of account number 3447  | \$2,000.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Department 475 Cross Point Pkwy, PO Box 9000 Getzville, NY 14068-9000 | When was the debt incurred?   | _          |
| Number Street City State ZIp Code  | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.  | ☐ Contingent  |            |
| Debtor 1 only  | ☐ Unliquidated  |            |
| ☐ Debtor 2 only  | Disputed  |            |
| ☐ Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |
| $\square$ At least one of the debtors and another  | ☐ Student loans   |            |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?                                      | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes  | Other. Specify Credit card  | _          |
| Capital Management Services, LP Nonpriority Creditor's Name  | Last 4 digits of account number   | \$6,995.67 |
| 726 Exchange Street  | When was the debt incurred? 9/2013  | _          |
| Suite 700  |   |            |
| Buffalo, NY 14210  Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.  |   |            |
| ■ Debtor 1 only  | ☐ Contingent  |            |
| ☐ Debtor 2 only  | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |
| ☐ At least one of the debtors and another  | Student loans   |            |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?                                      | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims               |            |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes  | Other. Specify citibank   | _          |
| citi cards   | Last 4 digits of account number 6442  | \$7,424.55 |
| Nonpriority Creditor's Name PO BOX 6500  | When was the debt incurred? 12/2013   | -          |
| Sioux Falls, SD 57117  Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |            |
| Who incurred the debt? Check one.  |   |            |
| ■ Debtor 1 only  | ☐ Contingent  |            |
| ☐ Debtor 2 only  | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |
| ☐ At least one of the debtors and another  | Student loans   |            |
| ☐ Check if this claim is for a community debt Is the claim subject to offset?                                      | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims               |            |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes  | Other. Specify credit   |            |
|  | — Other, Specify  |            |

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Debtor 1 Victor Villalobos Case number (if know) 4.11 Citibank Customer Service Last 4 digits of account number 2639 \$340.00 Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? 2013 Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.12 Codilis & Associates P.C. \$116,331.00 Last 4 digits of account number 4318 Nonpriority Creditor's Name 15 W030 North Frontage Road When was the debt incurred? 06/05/2002 Suite 100 Burr Ridge, IL 60527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Propert foreclosure 2330 W. Glen Flora ☐ Yes Other. Specify Waukegan, IL 60085. Surrendered 2014 4.13 **Credit Collection Services** Last 4 digits of account number \$150.49 8477 Nonpriority Creditor's Name **Two Wells Avenue** When was the debt incurred? 7/2013 **Department AMFAM** Newton Center, MA 02459 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify credit

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Debtor 1 Victor Villalobos Case number (if know) 4.14 **Discover Bank** Last 4 digits of account number 5127 \$4,249.00 Nonpriority Creditor's Name 2500 Lake Cook Road When was the debt incurred? 2013 Riverwoods, IL 60089 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.15 Financial Recovery Services, Inc. 5127 \$4,247.55 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 385908 When was the debt incurred? Minneapolis, MN 55438-5908 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections account ☐ Yes 4.16 **GE Capital Retail Bank** Last 4 digits of account number 3641 \$1,100.00 Nonpriority Creditor's Name When was the debt incurred? Bankruptcy Dept. PO BOX 103104 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes

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Debtor 1 Victor Villalobos Case number (if know) 4.17 I.C System, Inc. Last 4 digits of account number 5199 \$150.49 Nonpriority Creditor's Name 444 Highway 96 East, P.O. Box When was the debt incurred? 2013 64437 Saint Paul, MN 55164-0437 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify AT&T collections ☐ Yes 4.18 **Kohl's Payment Center** Last 4 digits of account number \$100.00 7147 Nonpriority Creditor's Name P.O. Box 2983 When was the debt incurred? Milwaukee, WI 53201-2983 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Cedit card 4.19 **Leading Edge Recovery Solutions** Last 4 digits of account number 3641 \$1,012.32 Nonpriority Creditor's Name P.O. Box 129 When was the debt incurred? 2/2014 Linden. MI 48451-0129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify **credit** 

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Document Page 25 of 58 Debtor 1 Victor Villalobos Case number (if know) **MIDWAY EMERGENCY** 4953 \$1,082.00 4.20 Last 4 digits of account number **PHYSICIANS** Nonpriority Creditor's Name P.O. Box 404320 When was the debt incurred? 01/01/2013 Atlanta, GA 30384-4320 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical services ☐ Yes 4.21 Monarch Recovery Management,Inc \$4,248.55 Last 4 digits of account number 5127 Nonpriority Creditor's Name When was the debt incurred? 10965 Decatur Rd Philadelphia, PA 19154-3210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections account ☐ Yes 4.22 **NES OF OHIO** Last 4 digits of account number 4619 \$2,633.15 Nonpriority Creditor's Name 29125 Solon Road When was the debt incurred? 08/2014 Solon, OH 44139-3442 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify credit collection

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Victor Villalobos Case number (if know) 4.23 **Northstar Location Servicies, LLC** Last 4 digits of account number 5127 \$4,248.00 Nonpriority Creditor's Name Financial Dept. When was the debt incurred? 2014 4285 Genesee St. Cheektowaga, NY 14225-1943 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit 4.24 Scheer Surgical, S. C. Last 4 digits of account number 8810 \$288.00 Nonpriority Creditor's Name 20 Tower Court When was the debt incurred? 10/25/2012 Suite A Gurnee, IL 60031 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical services Other, Specify 4.25 **Sears Credit cards** Last 4 digits of account number 7301 \$2,714.00 Nonpriority Creditor's Name O.O. Box 183082 When was the debt incurred? Columbus, OH 43218-3082 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes

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Debtor 1 Victor Villalobos Case number (if know) 4.26 Sears/CBNA Last 4 digits of account number 3115 \$300.00 Nonpriority Creditor's Name P.O. BOX When was the debt incurred? 6282 Sioux Falls, SD 57117-6282 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.27 The Children's Place Plan Last 4 digits of account number 2639 \$297.26 Nonpriority Creditor's Name PO Box 183015 When was the debt incurred? 10/2013 Columbus, OH 43218-3015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card 4.28 **United Recovery Systems** Last 4 digits of account number 2639 \$339.01 Nonpriority Creditor's Name PO Box 722929 When was the debt incurred? Houston, TX 77272-2929 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify citibank ☐ Yes

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Debtor 1 Victor Villalobos Case number (if know) 4.29 VCFE of lake county inc Last 4 digits of account number 5786 \$750.00 Nonpriority Creditor's Name PO BOX 790120 When was the debt incurred? 03/07/2013 Saint Louis, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes 4.30 6031 \$268.00 **Vista Imaging Assoc** Last 4 digits of account number Nonpriority Creditor's Name 3107 Spring Glen Rd. When was the debt incurred? **Ste 21** Jacksonville, FL 32207-5916 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ■ Other. Specify Collections account 4.31 **Vista Medical Center West** Last 4 digits of account number 3603 \$9,760.02 Nonpriority Creditor's Name When was the debt incurred? 2615 Washington Street 11/13 Attn: Patient Billing Department Waukegan, IL 60085 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes

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Durham & Durham L.L.P.

**Discover Fin Svcs Llc** 

Wilmington, DE 19850

**Discover Financial Services** 

Carol Stream, IL 60197-6103

Po Box 15316

Name and Address

P.O. Box 6103

Name and Address

Schedule E/F: Creditors Who Have Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Line 4.21 of (Check one):

Line 4.21 of (Check one):

Line 4.20 of (Check one):

Last 4 digits of account number

Last 4 digits of account number

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Case number (if know)

| 5665 New N<br>Suite 340                    | Northside Drive                  |   | Part 2: C  | reditors v | with Nonpriority Unsecured Claims   |  |  |
|--|----------------------------------|---|--|------------|---|--|--|
| Atlanta, GA                                | 30328                            | Last 4 digits of account number   |  |            |   |  |  |
| Name and Add<br>Financial R<br>P.O. Box 38 | ecovery Services, Inc.           | On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |  |            |   |  |  |
| Minneapoli                                 | s, MN 55438-5908                 | Last 4 digits of account number   | ■ Part 2: Ci   | realions   | with Nonphonty Onsecured Claims   |  |  |
| Name and Add                               | ress<br>cial Svcs Lp             | On which entry in Part 1 or Part 2 did y Line <b>4.11</b> of ( <i>Check one</i> ):  |  |            | ditor?<br>with Priority Unsecured Claims                                      |  |  |
| 7322 South<br>Ste 1<br>Houston, T          | -                                |   | Part 2: C  | reditors v | with Nonpriority Unsecured Claims   |  |  |
| Tiousion, i                                | X II OI 4                        | Last 4 digits of account number   |  |            |   |  |  |
| Name and Add<br>Monarch R<br>10965 Deca    | ecovery Management,Inc           | On which entry in Part 1 or Part 2 did y Line 4.14 of (Check one):  | Part 1: C  | reditors v | with Priority Unsecured Claims  |  |  |
| Philadelph                                 | a, PA 19154-3210                 | Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  |  |            |   |  |  |
|  | ocation Servicies, LLC           | On which entry in Part 1 or Part 2 did y Line <b>4.14</b> of ( <i>Check one</i> ):  | d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  |            |   |  |  |
| Financial D<br>4285 Genes<br>Cheektowa     | •                                |   | Part 2: C  | reditors v | with Nonpriority Unsecured Claims   |  |  |
|  |                                  | Last 4 digits of account number   |  |            |   |  |  |
| Name and Address PNC Bank, N.A.            |                                  | On which entry in Part 1 or Part 2 did y Line 4.12 of (Check one):  | ditor?<br>with Priority Unsecured Claims   |            |   |  |  |
| 1 Financial<br>Kalamazoo                   |                                  | Last 4 digits of account number   | Part 2: C  | reditors v | with Nonpriority Unsecured Claims   |  |  |
| Name and Add                               | ress                             | On which entry in Part 1 or Part 2 did y  | ou list the orig   | inal cred  | ditor?  |  |  |
| PNC Bank, N.A.  1 National City PKWY       |                                  | Line 4.12 of (Check one):   | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims                                     |            |   |  |  |
| Kalamazoo                                  | , мі 49009                       | Last 4 digits of account number   |  |            |   |  |  |
|  | en's Place Plan                  | On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one):  |  |            | ditor?<br>with Priority Unsecured Claims                                      |  |  |
| PO Box 183<br>Columbus,                    | 3015<br>OH 43218-3015            | Last 4 digits of account number   | Part 2: C  | reditors v | with Nonpriority Unsecured Claims   |  |  |
|  |                                  |   | P. cal.  |            | lu o  |  |  |
| -  | ke County<br>nt Club Road        | Line 4.29 of (Check one):   | did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims |            |   |  |  |
| Gurnee, IL                                 | 60031                            | Last 4 digits of account number   |  |            | , . ,   |  |  |
| Name and Add<br>Vista Imagi<br>Dept 5339   | _                                | On which entry in Part 1 or Part 2 did y Line 4.30 of (Check one):  | Part 1: C  | reditors v | ditor?<br>with Priority Unsecured Claims<br>with Nonpriority Unsecured Claims |  |  |
| PO Box 204                                 | 19<br>WI 53201-2049              |   | _ 1 dit 2. O   | ountile 1  | mar Horiphoniy Chocodrod Claimo   |  |  |
| WillWaukee                                 | WI 33201-2043                    | Last 4 digits of account number   |  |            |   |  |  |
|  | d the Amounts for Each Type of L |   |  |            |   |  |  |
| 6. Total the am<br>of unsecured            |                                  | ilms. This information is for statistical   | reporting pu   | rposes     | only. 28 U.S.C. §159. Add the amounts for each type                           |  |  |
|  | 6a. Domestic support obligation  | าร  | 6a.  | \$         | Total Claim 0.00  |  |  |
| Total claims from Part 1                   | 6b. Taxes and certain other deb  |   | 6b.  | \$         | 0.00  |  |  |

Official Form 106 E/F

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| Debtor 1            | Victor Vil | lalobos   | Case number (if know) |    | ow)         |
|---------------------|------------|---|-----------------------|----|-------------|
|                     | 6c.        | Claims for death or personal injury while you were intoxicated  | 6c.                   | \$ | 0.00        |
|                     | 6d.        | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.                   | \$ | 0.00        |
|                     | 6e.        | Total Priority. Add lines 6a through 6d.  | 6e.                   | \$ | 0.00        |
|                     |            |   |                       |    | Total Claim |
|                     | 6f.        | Student loans   | 6f.                   | \$ | 0.00        |
| tal clair<br>om Par |            | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | <b>I</b> 6g.          | \$ | 0.00        |
|                     | 6h.        | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.                   | \$ | 0.00        |
|                     | 6i.        | Other. Add all other nonpriority unsecured claims. Write that amount here                               | . 6i.                 | \$ | 181,220.36  |
|                     | 6j.        | Total Nonpriority. Add lines 6f through 6i.   | 6j.                   | \$ | 181,220.36  |

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|   |                          | Docume            | T ddc d2 di 30 |  |
|---|--------------------------|-------------------|----------------|--|
| Fill in this infor                      | rmation to identify your | case:             |                |  |
| Debtor 1                                | Victor Villalobos        |                   |                |  |
|   | First Name               | Middle Name       | Last Name      |  |
| Debtor 2                                |                          |                   |                |  |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name      |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS    |  |
| Case number                             |                          |                   |                |  |
| (if known)                              |                          |                   |                |  |
|   |                          |                   |                |  |

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| 1   | Person or | company with<br>Name, Number | whom you have the<br>, Street, City, State and ZIP ( | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|-------------------|---|
| 2.1 |           |                              |  |                   |   |
|     | Name      |                              |  |                   |   |
|     | Number    | Street                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          |   |
| 2.2 |           |                              |  |                   |   |
|     | Name      |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.3 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.4 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.5 |           |                              |  |                   |   |
|     | Name      |                              |  |                   |   |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          | <del>_</del>                            |
|     |           |                              |  |                   |   |

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|-----------------------------|---|---|-------------------------|--|---|
| Fill in this                | s information to identify your                                      | case:   |                         |  |   |
| Debtor 1                    | Victor Villalobos   |   |                         |  |   |
| Debtor 2                    | First Name  | Middle Name   | Last Name               |  |   |
| (Spouse if, fili            | ing) First Name   | Middle Name   | Last Name               |  |   |
| United Sta                  | ates Bankruptcy Court for the:                                      | NORTHERN DISTRICT OF  | ILLINOIS                |  |   |
| Case num<br>(if known)      | ber   |   |                         |  | ☐ Check if this is an amended filing  |
|                             | l Form 106H<br>Iule H: Your Cod                                     | ehtors  |                         |  | 12/15   |
| people are<br>ill it out, a | filing together, both are equ                                       | ally responsible for supplyin boxes on the left. Attach the | g correct information   | on. If more space is n                                     | ate as possible. If two married needed, copy the Additional Page, or of any Additional Pages, write       |
|                             | you have any codebtors? (If   |   | ot list either spouse a | as a codebtor.   |   |
| ■ No                        |   |   |                         |  |   |
| ■ No                        | 5   |   |                         |  |   |
|                             | hin the last 8 years, have you<br>na, California, Idaho, Louisiana, |   |                         |  | y states and territories include  |
|                             | . Go to line 3.<br>s. Did your spouse, former spot                  | use, or legal equivalent live with                          | n you at the time?      |  |   |
| in line<br>Form             | e 2 again as a codebtor only i                                      | f that person is a guarantor of                             | or cosigner. Make s     | sure you have listed th                                    | g with you. List the person shown<br>ne creditor on Schedule D (Officia<br>Schedule E/F, or Schedule G to |
|                             | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI | P Code  |                         | Column 2: The cree<br>Check all schedules                  | ditor to whom you owe the debt s that apply:  |
| 3.1                         | Name  |   |                         | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line | ne  |
|                             | Number Street<br>City   | State   | ZIP Code                |  |   |
| 3.2                         |   |   |                         | ☐ Schedule D, line   | ·   |
|                             | Name  |   |                         | ☐ Schedule E/F, line ☐ Schedule G, line                    |   |
| =                           | Number Street   |   |                         |  |   |

State

City

ZIP Code

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| Fill in this informa            | ation to identify your case:                          |  |
|---------------------------------|---|--|
| Debtor 1                        | Victor Villalobos                                     |  |
| Debtor 2<br>(Spouse, if filing) |   |  |
| United States Ba                | nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |  |
| Case number<br>(If known)       |   | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Fo                     | orm 106I  | 13 income as of the following date:  MM / DD/ YYYY                                 |

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ☐ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Inspector Include part-time, seasonal, or UNITED TACTICLE SYSTEMS self-employed work. Employer's name LLC Occupation may include student or homemaker, if it applies. **Employer's address** 28101 BALLARD DRIVE Suite F Lake Forest, IL 60045 How long employed there? 3 years **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 2,285.00 \$ 0.00

3. +\$ 507.00 +\$ 0.00

4. \$ 2,792.00 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

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| Debt | tor 1                       | Victor Villalobos   | -         | C          | Case number (if knov                    | vn)                              |         |               |                |                  |
|------|-----------------------------|---|-----------|------------|---|----------------------------------|---------|---------------|----------------|------------------|
|      |                             |   |           |            | For Debtor 1                            | For Debtor 2 or non-filing spous |         |               |                |                  |
|      | Cop                         | by line 4 here  | 4.        |            | \$ 2,792.0                              | 00                               | \$      |               | 0.00           | _                |
| 5.   | List                        | all payroll deductions:   |           |            |   |                                  |         |               |                |                  |
|      | 5a.                         | Tax, Medicare, and Social Security deductions   | 5a        | ۱.         | \$ 359.0                                | 00                               | \$      |               | 0.00           |                  |
|      | 5b.                         | Mandatory contributions for retirement plans  | 5b        |            | \$ 0.0                                  |                                  | \$      |               | 0.00           | _                |
|      | 5c.                         | Voluntary contributions for retirement plans  | 50        |            | \$ 0.0                                  |                                  | \$      |               | 0.00           | _                |
|      | 5d.                         | Required repayments of retirement fund loans Insurance  | 5d        |            | \$ 0.0<br>\$ 137.0                      |                                  | \$      |               | 0.00           | _                |
|      | 5e.<br>5f.                  | Domestic support obligations  | 5e<br>5f. |            | \$ 137.0<br>\$ 0.0                      | _                                | \$<br>— |               | 0.00           | _                |
|      | 5g.                         | Union dues  | 5g        |            | \$ 0.0                                  |                                  | \$      |               | 0.00           | _                |
|      | 5h.                         | Other deductions. Specify:  | 5h        | 1.+        | . — — — — — — — — — — — — — — — — — — — | 00 -                             | + \$    |               | 0.00           | _                |
| 6.   | Add                         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.        |            | \$ 496.0                                | 00                               | \$      |               | 0.00           | _                |
| 7.   | Cal                         | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.        |            | \$2,296.0                               | 00_                              | \$      |               | 0.00           | _                |
| 8.   | List<br>8a.                 | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a        | ۱.         | \$ 0.0                                  | 00                               | \$      |               | 0.00           |                  |
|      | 8b.                         | Interest and dividends  | 8b        | ).         | \$ 0.0                                  |                                  | \$      |               | 0.00           | _                |
|      | 8c.                         | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 80        | <b>:</b> . | \$ 0.0                                  | 00                               | \$      |               | 0.00           |                  |
|      | 8d.                         | Unemployment compensation   | 8d        |            | \$ 0.0                                  | 00                               | \$      |               | 0.00           | _                |
|      | 8e.                         | Social Security   | 8e        | €.         | \$0.0                                   | 00                               | \$      |               | 0.00           | _                |
|      | 8f.                         | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | 8f.       |            | \$0.0                                   |                                  | \$      |               | 0.00           | _                |
|      | 8g.                         | Pension or retirement income  | 8g        | ,          | \$ 0.0                                  |                                  | \$      |               | 0.00           | _                |
|      | 8h.                         | Other monthly income. Specify:  | _ 8n      | ۱.+<br>    | \$0.0                                   | 00 -                             | ٠       |               | 0.00           |                  |
| 9.   | Add                         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.        | \$         | 0.0                                     | 00                               | \$      |               | 0.0            | 0                |
| 10   | Cal                         | culate monthly income. Add line 7 + line 9.   | 10.       | \$         | 2,296.00 +                              | \$                               |         | 0.00          | = \$           | 2,296.00         |
|      |                             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |           | Ψ_         | 2,230.00                                | Ψ-                               |         | 0.00          | _              | 2,230.00         |
| 11.  | Star<br>Incli<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not scify:       | dep       |            |   |                                  | •       | chedul<br>11. |                | 0.00             |
| 12.  |                             | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies   |           |            |   |                                  |         | 12.           | \$             | 2,296.00         |
| 13.  | Do                          | you expect an increase or decrease within the year after you file this form   | ?         |            |   |                                  |         | l             | Combi<br>month | ned<br>ly income |
|      |                             | No.   |           |            |   |                                  |         |               |                |                  |
|      |                             | Voc Evoluin:  |           |            |   |                                  |         |               |                |                  |

Official Form 106I Schedule I: Your Income page 2

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| Fill      | in this information to identify   | your case:     | ·  |  |                 |                    |   |
|-----------|---|----------------|--|--|-----------------|--------------------|---|
| Deb       | otor 1 Victor Villa   | lobos          |  |  | Checl           | k if this is:      |   |
| Dob       | otor 2  |                |  |  | _               | An amended filing  | uing poetpetition chapter                     |
|           | ouse, if filing)  |                |  |  |                 |                    | ving postpetition chapter the following date: |
| Unit      | ted States Bankruptcy Court for th  | e: NORTH       | HERN DISTRICT OF ILLIN                       | IOIS   | 1               | MM / DD / YYYY     |   |
| Cas       | se number   |                |  |  |                 |                    |   |
|           | nown)   |                |  |  |                 |                    |   |
|           | W: 1 E 4001   |                |  |  |                 |                    |   |
|           | fficial Form 106J   |                |  |  |                 |                    |   |
| Be        | chedule J: Your as complete and accurate a  | EXPER          | ISES  If two married neonle a                | re filing together, hot                      | th are equ      | ally responsible f | 12/15   |
| info      | ormation. If more space is r<br>mber (if known). Answer ev  | needed, atta   | ach another sheet to this                    |  |                 |                    |   |
| Par<br>1. | t 1: Describe Your House Is this a joint case?  | sehold         |  |  |                 |                    |   |
| ••        | No. Go to line 2.   |                |  |  |                 |                    |   |
|           | ☐ Yes. Does Debtor 2 live   | e in a sepaı   | ate household?                               |  |                 |                    |   |
|           | ☐ No<br>☐ Yes. Debtor 2 m   | ust file Offic | ial Form 106J-2, <i>Expense</i> .            | s for Separate Househ                        | nold of Debi    | tor 2.             |   |
| 2.        | Do you have dependents  | ? 🗆 No         |  |  |                 |                    |   |
|           | Do not list Debtor 1 and Debtor 2.  | ■ Yes.         | Fill out this information for each dependent | Dependent's relation<br>Debtor 1 or Debtor 2 |                 | Dependent's age    | Does dependent live with you?                 |
|           | Do not state the  |                |  |  |                 |                    | □ No  |
|           | dependents names.   |                |  | Daughter  Daughter                           |                 | 1                  | Yes   |
|           |   |                |  |  |                 | 5                  | □ No<br>■ Yes                                 |
|           |   |                |  |  |                 |                    | □ No  |
|           |   |                |  | Daughter                                     |                 | 9                  | Yes   |
|           |   |                |  | Daughter                                     |                 | 14                 | □ No<br>■ Yes                                 |
| 3.        | Do your expenses include  | e <b>E</b>     | No   | <u> </u>                                     |                 |                    | ■ Yes   |
|           | expenses of people other yourself and your depend   | than 🦳         | Yes  |  |                 |                    |   |
| Dox       | <u> </u>  |                | ly Evnences                                  |  |                 |                    |   |
| Est       | tt 2: Estimate Your Ongo<br>timate your expenses as of<br>penses as of a date after the<br>plicable date. | your bankr     | uptcy filing date unless y                   |  |                 |                    |   |
| • •       | lude expenses paid for witl   | h non-cash     | government assistance                        | if you know                                  |                 |                    |   |
| the       | value of such assistance a<br>ficial Form 106l.)  |                |  |  |                 | Your exp           | enses   |
| 4.        | The rental or home owner payments and any rent for  | rship exper    | nses for your residence.                     | Include first mortgage                       | 4. \$           |                    | 800.00  |
|           | If not included in line 4:  | -              |  |  |                 |                    |   |
|           | 4a. Real estate taxes   |                |  |  | 4a. \$          |                    | 0.00  |
|           | 4b. Property, homeowne  | r's, or rente  | r's insurance                                |  | 4b. \$          |                    | 0.00  |
|           | 4c. Home maintenance,   |                |  |  | 4c. \$          |                    | 20.00   |
| 5.        | 4d. Homeowner's associ Additional mortgage payr   |                |  | ome equity loans                             | 4d. \$<br>5. \$ |                    | 0.00  |
| ٠.        |   | y              |  | Janes iouilo                                 | υ. ψ            |                    | 0.00  |

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| btor 1 Victor Villalobos   | Case num     | ber (if known) |                             |
|--|--------------|----------------|-----------------------------|
| Utilities:   |              |                |                             |
| 6a. Electricity, heat, natural gas   | 6a.          | \$             | 55.00                       |
| 6b. Water, sewer, garbage collection   | 6b.          | \$             | 0.00                        |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.          | \$             | 145.00                      |
| 6d. Other. Specify:  | 6d.          | \$             | 0.00                        |
| Food and housekeeping supplies   |              | ·              | 755.00                      |
| Childcare and children's education costs   | 8.           | ·              | 0.00                        |
| Clothing, laundry, and dry cleaning  | 9.           | ·              | 125.00                      |
| Personal care products and services  | 10.          |                | 40.00                       |
| Medical and dental expenses  | 11.          | ·              |                             |
| •  | 11.          | Φ              | 50.00                       |
| <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.  | 12.          | \$             | 220.00                      |
| Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.          | ·              | 0.00                        |
| Charitable contributions and religious donations   | 14.          |                | 0.00                        |
| •  | 14.          | Ψ              | 0.00                        |
| Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  |              |                |                             |
| 15a. Life insurance  | 15a.         | \$             | 0.00                        |
| 15b. Health insurance  | 15a.<br>15b. | ·              | 0.00                        |
| 15c. Vehicle insurance   | 15b.         | :              | 80.00                       |
| 15d. Other insurance. Specify:   | 15d.         | ·              |                             |
|  | 150.         | Ψ              | 0.00                        |
| <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   | 16.          | \$             | 0.00                        |
| Installment or lease payments:   |              | _              |                             |
| 17a. Car payments for Vehicle 1  | 17a.         | ·              | 0.00                        |
| 17b. Car payments for Vehicle 2  | 17b.         | \$             | 0.00                        |
| 17c. Other. Specify:   | 17c.         | \$             | 0.00                        |
| 17d. Other. Specify:   | 17d.         | \$             | 0.00                        |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  |              | \$             | 0.00                        |
| Other payments you make to support others who do not live with you.  |              | \$             | 0.00                        |
| Specify:   | 19.          |                |                             |
| Other real property expenses not included in lines 4 or 5 of this form or on School  | edule I: Y   | our Income.    |                             |
| 20a. Mortgages on other property   | 20a.         |                | 0.00                        |
| 20b. Real estate taxes   | 20b.         | \$             | 0.00                        |
| 20c. Property, homeowner's, or renter's insurance  | 20c.         | \$             | 0.00                        |
| 20d. Maintenance, repair, and upkeep expenses  | 20d.         |                | 0.00                        |
| 20e. Homeowner's association or condominium dues   | 20e.         |                | 0.00                        |
| Other: Specify:  |              | +\$            |                             |
| Cinor. Openiy.   |              | -Ψ             | 0.00                        |
| Calculate your monthly expenses  |              |                |                             |
| 22a. Add lines 4 through 21.   |              | \$             | 2,290.00                    |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |              | \$             | ,                           |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  |              | \$             | 2,290.00                    |
| Calculate your monthly net income.   |              |                |                             |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.         | \$             | 2,296.00                    |
| 23b. Copy your monthly expenses from line 22c above.   | 23a.<br>23b. |                | 2,290.00                    |
| 230. Copy your monthly expenses nom line 220 above.  | ۷۵۵.         | -φ             | 2,290.00                    |
| 23c. Subtract your monthly expenses from your monthly income.  |              |                |                             |
| The result is your <i>monthly net income</i> .   | 23c.         | \$             | 6.00                        |
| Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  No. |              |                | se or decrease because of a |
| Yes. Explain here:   |              |                |                             |
| LIVAC I EXDIAID DETE   |              |                |                             |

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| Fill in this infor                   | mation to identify your                              | case.                    |                            |                            |  |
|--------------------------------------|--|--------------------------|----------------------------|----------------------------|--|
| Debtor 1                             | Victor Villalobos                                    | case.                    |                            |                            |  |
| Debior 1                             | First Name   | Middle Name              | Last Name                  |                            |  |
| Debtor 2<br>(Spouse if, filing)      | First Name   | Middle Name              | Last Name                  |                            |  |
| United States Ba                     | ankruptcy Court for the:                             | NORTHERN DISTRICT        | OF ILLINOIS                |                            |  |
| Case number _ (if known)             |  |                          |                            |                            | ☐ Check if this is an amended filing                                 |
| Official Form                        |  | ın Individual            | Debtor's Sc                | hedules                    | 12/15  |
| obtaining money<br>years, or both. 1 | y or property by fraud i<br>8 U.S.C. §§ 152, 1341, 1 | n connection with a bank | kruptcy case can result    | in fines up to \$250,000,  | ent, concealing property, or<br>or imprisonment for up to 20         |
| Did you pa                           | y or agree to pay some                               | eone who is NOT an attor | ney to help you fill out b | bankruptcy forms?          |  |
| ■ No                                 |  |                          |                            |                            |  |
| ☐ Yes. N                             | Name of person                                       |                          |                            |                            | otcy Petition Preparer's Notice,<br>ad Signature (Official Form 119) |
| •                                    | Ity of perjury, I declare<br>e true and correct.     | that I have read the sum | mary and schedules file    | ed with this declaration a | and  |
| X /s/ Vict                           | tor Villalobos                                       |                          | Х                          |                            |  |
| Victor                               | Villalobos<br>re of Debtor 1                         |                          | Signature of               | Debtor 2                   |  |
| Date (                               | October 19, 2017                                     |                          | Date                       |                            |  |

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| Filli           | n this inforn                                 | nation to identify you                       | r case:  |   |   |   |
|-----------------|---|--|--|---|---|---|
| Debt            |   | Victor Villalobos                            |  |   |   |   |
| DCDI            | 101 1   | First Name                                   | Middle Name  | Last Name   |   |   |
| Debt            |   |  | ACT III AL   |   |   |   |
| (Spou           | se if, filing)                                | First Name                                   | Middle Name  | Last Name   |   |   |
| Unite           | ed States Bar                                 | nkruptcy Court for the:                      | NORTHERN DISTRICT (  | OF ILLINOIS   |   |   |
| Case<br>(if kno | e number                                      |  |  |   |   | Check if this is an mended filing                     |
|                 | icial Fo                                      |  | Affairs for Indivic  | duals Filing for B                                    | ankruptcy   | 4/16  |
| infori<br>numb  | mation. If moer (if knowr                     | ore space is needed,<br>n). Answer every que | , attach a separate sheet to stion.  | this form. On the top of an                           | equally responsible for sup<br>y additional pages, write yo     |   |
| Part            |   | current marital state                        | arital Status and Where You<br>us?   | u Lived Before  |   |   |
|                 | _   |  |  |   |   |   |
| I               | <ul><li>■ Married</li><li>□ Not mar</li></ul> | ried   |  |   |   |   |
| 2.              | During the la                                 | ast 3 years, have you                        | lived anywhere other than  | where you live now?                                   |   |   |
| I               | ■ No<br>□ Yes. Lis                            | t all of the places you                      | lived in the last 3 years. Do n  | not include where you live nov                        | v.  |   |
|                 | Debtor 1 Pr                                   | ior Address:                                 | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:  | Dates Debtor 2<br>lived there                         |
|                 |   |  |  |   | nity property state or territor<br>ico, Texas, Washington and V |   |
|                 | ■ No<br>□ Yes. Ma                             | ke sure you fill out Sc.                     | hedule H: Your Codebtors (O  | official Form 106H).                                  |   |   |
| Part            | 2 Explai                                      | n the Sources of You                         | ır Income  |   |   |   |
| I               | Fill in the tota                              | I amount of income yo                        | nployment or from operating ou received from all jobs and a have income that you receive | all businesses, including par                         |   | ndar years?   |
|                 | □ No<br>■ Yes. Fill                           | in the details.                              |  |   |   |   |
|                 |   |  | Debtor 1   |   | Debtor 2  |   |
|                 |   |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                      | Gross income<br>(before deductions<br>and exclusions) |
|                 |   | of current year until<br>d for bankruptcy:   | ■ Wages, commissions, bonuses, tips  | \$17,055.00   | ☐ Wages, commissions, bonuses, tips                             |   |
|                 |   |  | ☐ Operating a business   |   | ☐ Operating a business  |   |

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|    |                              |   |   | Debtor 1   |   | Debtor 2   |                                       |   |
|----|------------------------------|---|---|--|---|--|---------------------------------------|---|
|    |                              |   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of inco  |                                       | Gross income<br>(before deductions<br>and exclusions) |
|    | or last caler<br>anuary 1 to |   | 31, 2016 )  | ■ Wages, commissions, bonuses, tips  | \$37,708.00   | ☐ Wages, combonuses, tips  | missions,                             |   |
|    |                              |   |   | ☐ Operating a business   |   | ☐ Operating a b  | ousiness                              |   |
|    | or the calen<br>anuary 1 to  |   |   | ■ Wages, commissions, bonuses, tips  | \$43,799.00   | ☐ Wages, combonuses, tips  | missions,                             |   |
|    |                              |   |   | ☐ Operating a business   |   | ☐ Operating a b  | ousiness                              |   |
|    | unemploy gambling  List each | ment, and cand lottery w                  | ther public be<br>vinnings. If yo<br>the gross inco   | ner that income is taxable. Examples that income is taxable. Examples the payments; pensions; rerula are filing a joint case and your many from each source separates.   | ntal income; interest; dividen-<br>ou have income that you rec  | ds; money collecte<br>eived together, list                         | d from laws<br>it only once           | uits; royalties; and                                  |
|    |                              |   |   | Dalitan 4  |   | D-1:1-: 0  |                                       |   |
|    |                              |   |   | Debtor 1 Sources of income Describe below.   | Gross income from each source (before deductions and exclusions)  | Debtor 2<br>Sources of inco<br>Describe below.                     |                                       | Gross income<br>(before deductions<br>and exclusions) |
| Pa | art 3: Lis                   | t Certain Pa                              | vments You  | Made Before You Filed for  | Bankruptcv  |  |                                       |   |
| 6. | Are eithe ☐ No.              | Neither D individual  During the No.  Yes | ebtor 1 nor Deprimarily for a 90 days before Go to line 7 List below 6 paid that crunot include | lebtor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, discontinuous consumer to whom you paieditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years. | Imer debts. Consumer debtald purpose."  d you pay any creditor a total d a total of \$6,425* or more ats for domestic support oblighis bankruptcy case. | il of \$6,425* or moi<br>in one or more pay<br>gations, such as ch | re?<br>rments and t<br>illd support a | the total amount you<br>and alimony. Also, do         |
|    | ■ Yes.                       |   |   | r both have primarily consure you filed for bankruptcy, di   |   | ıl of \$600 or more?   |                                       |   |
|    |                              | ■ No.                                     | Go to line 7  | •  |   |  |                                       |   |
|    |                              | □ Yes                                     | include pay   | each creditor to whom you pai<br>ments for domestic support of<br>for this bankruptcy case.  |   |  |                                       |   |
|    | Creditor                     | 's Name an                                | d Address   | Dates of payme   | nt Total amount   | Amount you   | Was this p                            | payment for   |

paid

still owe

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| 7.              | Within 1 year before you filed for bankrupt Insiders include your relatives; any general pacorporations of which you are an officer, directincluding one for a business you operate as a support and alimony.  No | artners; relatives of any gen<br>tor, person in control, or ow | eral partners; partner<br>ner of 20% or more                                  | erships of which you of their voting sec | ou are a general curities; and any | partner;<br>managing agent,               |
|-----------------|---|--|---|--|------------------------------------|---|
|                 | ☐ Yes. List all payments to an insider.   |  |   |  |                                    |   |
|                 | Insider's Name and Address  | Dates of payment   | Total amount paid   | Amount you still owe                     | Reason for th                      | is payment                                |
| 8.              | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No  |  | ments or transfer a   | ny property on a                         | eccount of a deb                   | t that benefited an                       |
|                 | ☐ Yes. List all payments to an insider  |  |   |  |                                    |   |
|                 | Insider's Name and Address  | Dates of payment   | Total amount paid   | Amount you still owe                     | Reason for th                      |   |
| <b>Pa</b><br>9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  | cy, were you a party in an                                     |   |  |                                    |   |
|                 | □ No  |  |   |  |                                    |   |
|                 | Yes. Fill in the details.   |  | _   |  |                                    |   |
|                 | Case title Case number  | Nature of the case   | Court or agency   |  | Status of the                      | case                                      |
|                 | Cavalry SPV I, LLC vs. VICTOR VILLALOBOS 17-SC1406  | Small Claims   | IN THE CIRCUI<br>THE 19TH JU<br>LAKE COUNTY<br>18 N. COUNTY<br>Waukegan, IL 6 | , ILLINOIS<br>STREET                     | ■ Pending □ On appeal □ Concluded  |   |
| 10.             | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address                                |  | erty repossessed, f   | oreclosed, garnis                        | shed, attached,                    | seized, or levied?  Value of the property |
|                 |   | Explain what happened  | I   |  |                                    | property                                  |
| 11.             | Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.   |  | luding a bank or fii  | nancial institutio                       | n, set off any an                  | nounts from your                          |
|                 | Creditor Name and Address   | Describe the action the  | creditor took   | Date<br>taker                            | action was                         | Amount                                    |
| 12.             | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes   |  | erty in the possess   | ion of an assigne                        | ee for the benefi                  | t of creditors, a                         |

| Dok | otor 1       |  | Doc 1 F        | iled 10/19/17<br>Document   | Entered 10/19/17<br>Page 42 of 58 |   | Main                   |
|-----|--------------|--|----------------|---|-----------------------------------|---|------------------------|
| Det | otor 1       | Victor Villalobos  |                |   | Case numb                         | Del (# known)                           |                        |
| Par | t 5:         | List Certain Gifts and Cont  | ributions      |   |                                   |   |                        |
| 13. | Withi        | n 2 years before you filed fo  | or bankruptcy, | did you give any gi   | fts with a total value of mo      | re than \$600 per person                | ?                      |
|     | _            | No   |                | , , , ,   |                                   |   |                        |
|     |              | es. Fill in the details for each   | gift.          |   |                                   |   |                        |
|     |              | s with a total value of more t<br>person   | han \$600      | Describe the gift   | S                                 | Dates you gave the gifts                | Value                  |
|     | Pers<br>Addr | on to Whom You Gave the 0<br>ess:  | Gift and       |   |                                   |   |                        |
| 14. | <b>I</b>     | n 2 years before you filed fo  |                |   | fts or contributions with a t     | total value of more than                | \$600 to any charity?  |
|     |              | Yes. Fill in the details for each  | ŭ              |   |                                   | <b>D</b> /                              |                        |
|     | more<br>Char | or contributions to charitie<br>than \$600<br>rity's Name                                      |                | Describe what yo  | ou contributed                    | Dates you contributed                   | Value                  |
|     | Addr         | 'ess (Number, Street, City, State and  | d ZIP Code)    |   |                                   |   |                        |
| Par | t 6:         | List Certain Losses  |                |   |                                   |   |                        |
| 15. | disas        | n 1 year before you filed for<br>ter, or gambling?<br>No                                       | bankruptcy o   | r since you filed for   | bankruptcy, did you lose a        | nything because of thef                 | t, fire, other         |
|     |              | es. Fill in the details.   |                |   |                                   |   |                        |
|     |              | cribe the property you lost a  |                | •   | coverage for the loss             | Date of your loss                       | Value of property lost |
|     | pendi        |  | pendir         | nclude the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B:  Property. |                                   | 1055                                    | 1051                   |
| Par | t 7:         | List Certain Payments or Ti  | ransfers       |   |                                   |   |                        |
|     | Withi        | n 1 year before you filed for<br>ulted about seeking bankrup<br>le any attorneys, bankruptcy p | bankruptcy, c  | ing a bankruptcy pe   | etition?                          |   | rty to anyone you      |
|     |              | No   |                |   |                                   |   |                        |
|     |              | Yes. Fill in the details.  |                |   |                                   |   |                        |
|     | Addr<br>Emai | on Who Was Paid<br>ess<br>il or website address<br>on Who Made the Payment,                    | if Not You     | Description and transferred   | value of any property             | Date payment<br>or transfer was<br>made | Amount of payment      |
|     | 5 S.         | Offices of Marcelino Dia<br>County Street<br>Ikegan, IL 60085                                  | nz             |   |                                   | 09/09/2017                              | \$1,465.00             |
|     |              |  |                |   |                                   |   |                        |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

☐ Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment made

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| 8.  | Within 2 years before you filed for bankrup  | tcy, did you sell, trade, o   | or otherwise tran         | sfer any pr  | operty to anyone, other                                      | r than property                               |
|---|--|---|---------------------------|--------------|--|---|
|   | transferred in the ordinary course of your k<br>Include both outright transfers and transfers m<br>include gifts and transfers that you have alrea | nade as security (such as   | the granting of a s       | ecurity inte | rest or mortgage on your                                     | property). Do not                             |
|   | ■ No □ Yes. Fill in the details.   |   |                           |              |  |   |
|   | Person Who Received Transfer<br>Address  | Description and v property transferr                                      |                           | paymen       | e any property or<br>ts received or debts<br>exchange        | Date transfer was made                        |
|   | Person's relationship to you   |   |                           | pulu III     | 90   |   |
| 19.   | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr  |   | y property to a s         | elf-settled  | trust or similar device o                                    | of which you are a                            |
|   | Yes. Fill in the details.  |   |                           |              |  |   |
|   | Name of trust  | Description and v   | alue of the prope         | erty transfe | erred  | Date Transfer was made                        |
|   |  |   |                           |              |  | maue  |
| Par   | t 8: List of Certain Financial Accounts, In  | struments, Safe Deposit   | t Boxes, and Sto          | rage Units   |  |   |
| 20.   | Within 1 year before you filed for bankrupte sold, moved, or transferred?  | •   |                           |              |  |   |
|   | Include checking, savings, money market, houses, pension funds, cooperatives, assortion No   |   |                           |              | snares in Danks, credit                                      | umons, brokerage                              |
|   | ☐ Yes. Fill in the details.  |   |                           |              |  |   |
|   | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number   | Type of accoun instrument | o<br>n       | Date account was<br>closed, sold,<br>noved, or<br>ransferred | Last balance<br>before closing or<br>transfer |
| 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for se cash, or other valuables? |  |   |                           |              | tory for securities,   |   |
|   | ■ No □ Yes. Fill in the details.   |   |                           |              |  |   |
|   | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, St<br>State and ZIP Code)            |                           | escribe th   | e contents   | Do you still have it?                         |
| 22.   | Have you stored property in a storage unit   | or place other than your  | home within 1 y           | ear before   | you filed for bankrupto                                      | y?  |
|   | ■ No □ Yes. Fill in the details.   |   |                           |              |  |   |
|   | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or h<br>to it?<br>Address (Number, Si<br>State and ZIP Code) |                           | escribe th   | e contents   | Do you still have it?                         |
| Par   | t 9: Identify Property You Hold or Contro  | I for Someone Else  |                           |              |  |   |
| 23.   | Do you hold or control any property that so for someone.   | omeone else owns? Inclu   | ude any property          | you borro    | wed from, are storing fo                                     | or, or hold in trust                          |
|   | ■ No □ Yes. Fill in the details.   |   |                           |              |  |   |
|   | Owner's Name   | Where is the prop   | perty? [                  | Describe th  | e property   | Value   |
|   | Address (Number, Street, City, State and ZIP Code)   | (Number, Street, City, S<br>Code)   |                           |              |  |   |
| Par   | t 10: Give Details About Environmental In  | formation   |                           |              |  |   |
| or  | the purpose of Part 10, the following definit  | ions apply:   |                           |              |  |   |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

|   | hazardous material, pollutant, contaminant, or similar term.                              |  |  |                    |  |  |  |
|---|---|--|--|--------------------|--|--|--|
| Rep   | ort all notices, releases, and proceedings that   | you know about, regardless of when   | n they occurred.   |                    |  |  |  |
| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environment |   |  |  |                    |  |  |  |
|   | ■ No □ Yes. Fill in the details.  |  |  |                    |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)                        | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                                  | Date of notice     |  |  |  |
| 25.   | Have you notified any governmental unit of ar   | ny release of hazardous material?  |  |                    |  |  |  |
|   | ■ No □ Yes. Fill in the details.  |  |  |                    |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)                        | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                                  | Date of notice     |  |  |  |
| 26.   | Have you been a party in any judicial or admir  | nistrative proceeding under any envi                                       | ironmental law? Include settlements a                              | nd orders.         |  |  |  |
|   | ■ No<br>□ Yes. Fill in the details.   |  |  |                    |  |  |  |
|   | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case   | Status of the case |  |  |  |
| Par   | 111: Give Details About Your Business or Co   | onnections to Any Business   |  |                    |  |  |  |
| 27.   | Within 4 years before you filed for bankruptcy  | , did you own a business or have ar  | ny of the following connections to any                             | business?          |  |  |  |
|   | ☐ A sole proprietor or self-employed in a   | a trade, profession, or other activity,                                    | either full-time or part-time                                      |                    |  |  |  |
|   | ☐ A member of a limited liability compar  | ny (LLC) or limited liability partnersh                                    | nip (LLP)  |                    |  |  |  |
|   | ☐ A partner in a partnership  |  |  |                    |  |  |  |
|   | ☐ An officer, director, or managing executive of a corporation                            |  |  |                    |  |  |  |
|   | ☐ An owner of at least 5% of the voting of  | or equity securities of a corporation                                      |  |                    |  |  |  |
|   | ■ No. None of the above applies. Go to Par  | rt 12.   |  |                    |  |  |  |
|   | ☐ Yes. Check all that apply above and fill in   | the details below for each business  | s.   |                    |  |  |  |
|   | Business Name D<br>Address  | Describe the nature of the business  | Employer Identification number<br>Do not include Social Security n | umber or ITIN      |  |  |  |
|   |   | lame of accountant or bookkeeper   | Dates business existed   | umber of friit.    |  |  |  |
| 28.   | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | , did you give a financial statement                                       |  | de all financial   |  |  |  |
|   | ■ No □ Yes. Fill in the details below.  |  |  |                    |  |  |  |
|   | Name Address (Number, Street, City, State and ZIP Code)                                   | Pate Issued  |  |                    |  |  |  |
|   | 0' D I  |  |  |                    |  |  |  |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Vi | ctor Villalobos                 |  |   |
|--------|---------------------------------|--|---|
| Victo  | r Villalobos                    | Signature of Debtor 2  |   |
| Signa  | ture of Debtor 1                |  |   |
| Date   | October 19, 2017                | Date   |   |
| Did yo | u attach additional pages to Yo | r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107) | ? |
| ■ No   |                                 |  |   |
| ☐ Yes  | <b>3</b>                        |  |   |
| Did yo | u pay or agree to pay someone   | who is not an attorney to help you fill out bankruptcy forms?                              |   |
| ■ No   |                                 |  |   |
| □ Yes  | s. Name of Person . Attach      | he Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  |   |

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|                                 |   |                      |  | _   |
|---------------------------------|---|----------------------|--|---|
| Fill in this infor              | rmation to identify your case                       | e:                   |  |   |
| Debtor 1                        | Victor Villalobos                                   |                      |  |   |
|                                 | First Name  | Middle Name          | Last Name  |   |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name          | Last Name  |   |
|                                 |   |                      |  |   |
| United States Ba                | ankruptcy Court for the: NO                         | RTHERN DISTRIC       | T OF ILLINOIS  |   |
| Case number                     |   |                      |  |   |
| (if known)                      |   |                      |  | ☐ Check if this is an                                   |
|                                 |   |                      |  | amended filing  |
|                                 |   |                      |  |   |
| Official Fo                     | orm 108   |                      |  |   |
| Stateme                         | nt of Intention f                                   | or Individ           | uals Filing Under Chap   | tor 7   |
| Stateme                         |   | OI IIIGIVIG          | dais i illig Olidei Oliap  | 12/15   |
| If you are an ind               | dividual filing under chapter                       | 7. vou must fill ou  | t this form if:  |   |
|                                 | ve claims secured by your pr                        | . •                  |  |   |
| _                               | sed personal property and th                        | •                    | xpired.  |   |
| You must file th                | is form with the court within                       | 30 days after you    | file your bankruptcy petition or by the date                             |   |
| whiche<br>on the                |   | urt extends the tin  | ne for cause. You must also send copies to                               | the creditors and lessors you list                      |
|                                 |   |                      |  |   |
|                                 | eople are filing together in a<br>nd date the form. | i joint case, both a | re equally responsible for supplying correc                              | ct information. Both debtors must                       |
| Sign a                          | nd date the form.                                   |                      |  |   |
|                                 |   |                      | eded, attach a separate sheet to this form.                              | On the top of any additional pages,                     |
| write y                         | your name and case number                           | (if known).          |  |   |
| Part 1: List Y                  | our Creditors Who Have Sec                          | cured Claims         |  |   |
| 1 For any credit                | tors that you listed in Part 1                      | of Schedule D: Cr    | editors Who Have Claims Secured by Prop                                  | erty (Official Form 106D) fill in the                   |
| information b                   | elow.   |                      | editors who have claims secured by Frop                                  | erty (Omciai i omi 100b), illi ili tile                 |
| Identify the cr                 | reditor and the property that is                    |                      | hat do you intend to do with the property tecures a debt?                | hat Did you claim the property as exempt on Schedule C? |
|                                 |   | 30                   | ecures a debt:   | as exempt on schedule c:                                |
| Creditor's                      |   |                      | Surrender the property.  | □ No  |
| name:                           |   |                      | Retain the property and redeem it.                                       |   |
| Description of                  | f   |                      | Retain the property and enter into a Reaffirmation Agreement.            | ☐ Yes   |
| property                        | •   | П                    | Retain the property and [explain]:                                       |   |
| securing debt                   | t:  | _                    | Trotain the property and [explain].                                      |   |
|                                 |   |                      |  |   |
| Creditor's                      |   |                      | Surrender the property.  | □ No  |
| name:                           |   |                      | Retain the property and redeem it.                                       | ☐ Yes   |
| Description of                  | f   | Ц                    | Retain the property and enter into a Reaffirmation Agreement.            | □ res   |
| property                        |   |                      | Retain the property and [explain]:                                       |   |
| securing debt                   | t:  | _                    |  |   |
|                                 |   |                      |  |   |
| Creditor's name:                |   |                      | Surrender the property.  | □ No  |
| патте:                          |   |                      | Retain the property and redeem it.  Retain the property and enter into a | □Yes  |
| Description of                  | f   |                      | Retain the property and enter into a Reaffirmation Agreement.            | 55  |

Official Form 108

Creditor's

property

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

☐ Retain the property and [explain]:

☐ No

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| Debtor 1                               | Victor Villalobos   | Case number (if kno   | wn)                                 |
|--|---|---|-------------------------------------|
| name:  Descrip property securin        | у   | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>                             | ☐ Yes                               |
| For any ur<br>in the info              | rmation below. Do not list real estate  | erty Leases<br>t you listed in Schedule G: Executory Contracts and Unexp<br>e leases. Unexpired leases are leases that are still in effect<br>erty lease if the trustee does not assume it. 11 U.S.C. § 365 | the lease period has not yet ended. |
| Describe                               | your unexpired personal property le   | ases  | Will the lease be assumed?          |
| Lessor's r<br>Description<br>Property: | name:<br>n of leased  |   | □ No □ Yes                          |
| Lessor's r<br>Description<br>Property: | name:<br>nn of leased   |   | □ No □ Yes                          |
| Lessor's r<br>Descriptio<br>Property:  | name:<br>on of leased   |   | □ No □ Yes                          |
| Lessor's r<br>Description<br>Property: | name:<br>on of leased   |   | □ No □ Yes                          |
| Lessor's r<br>Description<br>Property: | name:<br>nn of leased   |   | □ No □ Yes                          |
| Lessor's r<br>Description<br>Property: | name:<br>on of leased   |   | □ No □ Yes                          |
| Lessor's r<br>Descriptio<br>Property:  | name:<br>n of leased  |   | □ No                                |
| Under per                              | Sign Below  nalty of perjury, I declare that I have i hat is subject to an unexpired lease. | ndicated my intention about any property of my estate that  | secures a debt and any personal     |
| Vict                                   | rictor Villalobos or Villalobos ature of Debtor 1   | X Signature of Debtor 2   |                                     |
| Date                                   | October 19, 2017  | Date  |                                     |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-31375 Doc 1 Filed 10/19/17 Entered 10/19/17 16:31:32 Desc Main Document Page 52 of 58

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Northern District of Illinois

| In re       | Victor Villalobos  |   | Case No.  |                                    |    |
|-------------|--|---|---|------------------------------------|----|
|             |  | Debtor(s)   | Chapter   | 7                                  | _  |
|             | DISCLOSURE OF COMPE  | NSATION OF ATTO   | RNEY FOR DE   | BTOR(S)                            |    |
| c           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation  | ng of the petition in bankruptcy.   | , or agreed to be paid  | to me, for services rendered or to | )  |
|             | For legal services, I have agreed to accept  |   | \$  | 1,465.00                           |    |
|             | Prior to the filing of this statement I have received.   |   | \$  | 1,465.00                           |    |
|             | Balance Due  |   | \$  | 0.00                               |    |
| 2. \$       | <b>335.00</b> of the filing fee has been paid.   |   |   |                                    |    |
| 3. T        | The source of the compensation paid to me was:   |   |   |                                    |    |
|             | ■ Debtor □ Other (specify):  |   |   |                                    |    |
| 4. T        | The source of compensation to be paid to me is:  |   |   |                                    |    |
|             | ■ Debtor □ Other (specify):  |   |   |                                    |    |
| 5. <b>I</b> | ■ I have not agreed to share the above-disclosed comp  | pensation with any other person   | unless they are memb  | pers and associates of my law firm | n. |
| [           | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar   |   |   |                                    |    |
| 6. I        | In return for the above-disclosed fee, I have agreed to re   | ender legal service for all aspect  | ts of the bankruptcy c  | ase, including:                    |    |
| b<br>c      | <ul> <li>Analysis of the debtor's financial situation, and render</li> <li>Preparation and filing of any petition, schedules, states</li> <li>Representation of the debtor at the meeting of creditor</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on home</li> </ul> | ement of affairs and plan which<br>ors and confirmation hearing, a<br>reduce to market value; ex-<br>ons as needed; preparation | n may be required;<br>nd any adjourned hea<br>emption planning; | rings thereof;                     |    |
| 7. B        | By agreement with the debtor(s), the above-disclosed fer<br>Representation of the debtors in any dis<br>any other adversary proceeding.  |   |   | es, relief from stay actions o     | or |
|             |  | CERTIFICATION   |   |                                    | _  |
|             | certify that the foregoing is a complete statement of any ankruptcy proceeding.  | y agreement or arrangement for  | payment to me for re  | presentation of the debtor(s) in   |    |
| 0           | ctober 19, 2017  | /s/ Marcelino Dia   | z   |                                    |    |
| Date        |  | Marcelino Diaz 6  | 271542  |                                    |    |
|             |  | Signature of Attorne Law Offices of M   |   |                                    |    |
|             |  | 5 S. County Stree   | et  |                                    |    |
|             |  | Waukegan, IL 60   |   | •                                  |    |
|             |  | (847) 244-7288 F<br>lawyermdiaz@ya  | Fax: (847) 244-7294<br>hoo.com                                  | •                                  |    |
|             |  | Name of law firm  |   |                                    |    |

#### **United States Bankruptcy Court** Northern District of Illinois

| In re | Victor Villalobos   |   | Case No   |  |  |
|-------|---|---|-----------|--|--|
|       |   | Debtor(s)   | Chapter 7 |  |  |
|       | VER   | RIFICATION OF CREDITOR MA                                   | ATRIX     |  |  |
|       | Number of Creditors: 42   |   |           |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |           |  |  |
| Date: | October 19, 2017  | /s/ Victor Villalobos Victor Villalobos Signature of Debtor |           |  |  |

888rentme2, LLC 1954 First Street Highland Park, IL 60035

account resolution corporation PO BOX 3860 Chesterfield, MO 63006

AFNI 1310 Martin Luther Kind Drive PO BOX 3068 Bloomington, IL 61702

AR Resources 3107 Spring Glen Road Suite 21 Jacksonville, FL 32207-5916

ARS National Services, Inc. PO Box 463023 Escondido, CA 92046-3023

ARS National Services, Inc. PO Box 469100 Escondido, CA 92046-9100

AT&T U-verse (SM) P.O. Box 1857 Alpharetta, GA 30023

Bank of America Attn: Bankruptcy Department 475 Cross Point Pkwy, PO Box 9000 Getzville, NY 14068-9000

Capital Management Services, LP 726 Exchange Street Suite 700 Buffalo, NY 14210

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613 citi cards PO BOX 6500 Sioux Falls, SD 57117

Citibank Customer Service P.O. Box 6500 Sioux Falls, SD 57117

Client Services Inc 3451 Harry Truman Blvd. Saint Charles, MO 63301

Codilis & Associates P.C. 15 W030 North Frontage Road Suite 100 Burr Ridge, IL 60527

Credit Collection Services Two Wells Avenue Department AMFAM Newton Center, MA 02459

Discover Bank 2500 Lake Cook Road Riverwoods, IL 60089

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Discover Financial Services P.O. Box 6103 Carol Stream, IL 60197-6103

Durham & Durham L.L.P. 5665 New Northside Drive Suite 340 Atlanta, GA 30328

Financial Recovery Services, Inc. P.O. Box 385908
Minneapolis, MN 55438-5908

GE Capital Retail Bank Bankruptcy Dept. PO BOX 103104 Roswell, GA 30076

I.C System, Inc.
444 Highway 96 East, P.O. Box 64437
Saint Paul, MN 55164-0437

Kohl's Payment Center P.O. Box 2983 Milwaukee, WI 53201-2983

Leading Edge Recovery Solutions P.O. Box 129 Linden, MI 48451-0129

LTD Financial Svcs Lp 7322 Southwest Fwy Ste 1 Houston, TX 77074

MIDWAY EMERGENCY PHYSICIANS P.O. Box 404320 Atlanta, GA 30384-4320

Monarch Recovery Management, Inc 10965 Decatur Rd Philadelphia, PA 19154-3210

NES OF OHIO 29125 Solon Road Solon, OH 44139-3442

Northstar Location Servicies, LLC Financial Dept. 4285 Genesee St. Cheektowaga, NY 14225-1943

PNC Bank, N.A. 1 Financial PKWY Kalamazoo, MI 49009 PNC Bank, N.A. 1 National City PKWY Kalamazoo, MI 49009

Scheer Surgical, S. C. 20 Tower Court Suite A Gurnee, IL 60031

Sears Credit cards O.O. Box 183082 Columbus, OH 43218-3082

Sears/CBNA
P.O. BOX
6282
Sioux Falls, SD 57117-6282

The Children's Place Plan PO Box 183015 Columbus, OH 43218-3015

United Recovery Systems PO Box 722929 Houston, TX 77272-2929

VCFE of Lake County 1425 N. Hunt Club Road Gurnee, IL 60031

VCFE of lake county inc PO BOX 790120 Saint Louis, MO 63179

Vista Imaging Assoc 3107 Spring Glen Rd. Ste 21 Jacksonville, FL 32207-5916

Vista Imaging Assoc. Dept 5339 PO Box 2049 Milwaukee, WI 53201-2049

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Vista Medical Center West 2615 Washington Street Attn: Patient Billing Department Waukegan, IL 60085

Walmart Discover/GECRB p. o box 960024 Orlando, FL 32896-0024